



COLUMBIA UNIVERSITY  
IRVING MEDICAL CENTER

# PARKINSON NEWSLETTER

Spring 2019

## Role of Occupational Therapists in Parkinson's Disease

By Katrina Long, MS, OTR/L, EdD Candidate

There is tremendous health value from engaging in activities that are purposeful or meaningful to us, whether in our work, leisure, or social life. But sometimes these activities become challenging to maintain or we become disengaged due to physical, psychological, or other issues related to Parkinson's disease (PD). Occupational therapists (OTs) help people to stay engaged, and support people to do the things they care about. The term "occupation" in OT refers to activities. Whether you have just been diagnosed with PD, or you've been living with PD for 20+ years, the aim of occupational therapy is the same: to help you reach your goals and support your level of independence with consideration of your individual strengths, your environment, and the activities that are important to you.

Activity limitations may happen early in the disease and progress with time, but OTs can intervene to support your participation in activities and roles that you value. OTs are trained to deliver evidence-based interventions in different settings such as in the home, community, and healthcare settings, depending on your needs. OTs can teach you tailored physical activities and environmental cues to improve or regulate your motor skills and physical performance. In addition, OTs can teach you self-management and cognitive-behavioral strategies to help you develop or maintain healthy habits and routines to improve your quality of life and occupational performance.



OTs who specialize in treating patients with neurological disorders or movement disorders are best suited for addressing issues related to PD. Therapists who have been trained in programs such as LSVT BIG (Lee Silverman Voice Treatment—BIG) and PWR! (Parkinson's Wellness Recovery) are skilled in teaching particular movements designed to address common PD symptoms.

Research has shown that physical activity and exercise are key in managing PD symptoms and both are recommended as a preventative approach to injury, health promotion, and rehabilitation to delay the onset and slow the progression of disability (Cavanaugh et al., 2015). OTs can help you to set physical activity goals, identify PD-specific exercise programs near you (such as Rock Steady Boxing, and Dance for PD), and support your overall engagement while addressing barriers and facilitators to your routine. Be sure to talk to your doctor and ask for a referral for an experienced OT who can address your concerns through instrumental, emotional, and informational supports.



## Support Groups!

The Department of Neurology currently hosts two support groups:  
**PD Patient Support Group.** Meets the last Tuesday of every month. For more information and to register please contact Elizabeth Delaney, LMSW at 212-305-5779.

**Deep Brain Stimulation (DBS) support group.** For information regarding the next DBS meeting, please contact Linda Winfield, RN at 212-305-1303.

## Parkinson's Unity Walk

**When:** April 27, 2019

**Where:** Central Park, NY, NY

**Why:** To fundraise and raise awareness for the PD community and research.



For more information or to register, please visit

[www.unitywalk.org](http://www.unitywalk.org)

To walk with CUIMC register here:

<http://support.unitywalk.org/goto/CUIMC>

## Center Spotlight! : New PD Study on Autoimmune Features of Parkinson's Disease

### What is this study?

We are doing this study to better understand the role of immune response in Parkinson's disease (PD).

- An immune response is how your body recognizes and defends itself against bacteria, viruses, and substances that appear foreign and harmful.
- PD is caused by loss of dopamine neurons in the substantia nigra (SN), a part of the midbrain associated with movement.
- Our research team have recently found that there may be an immune response to a protein (or proteins) in the brains of people with PD. This immune response may in turn lead to loss of brain cells in PD.

We now want to look further into the connection between the immune system and PD.

### Why is this important?

What we learn from this study could help us find a biomarker for PD. A biomarker can tell us about the presence of a disease and how the disease changes over time. Understanding more about the immune system's role in PD could help us better treat and care for PD patients.

### What is involved?

This study will recruit individuals with Parkinson's disease. Participating in this study will include **up to 2 visits**. Participants will have a brief questionnaire, cognitive test and neurological exam, and will **donate up to 250cc (17 tablespoons) of blood samples**.

### Who is the study sponsor?

The United States National Institutes of Health

### Who can participate?

If you are older than 55 years old

If you were diagnosed with PD for at least 3 years

If you are interested in participating or want to learn more, contact Heather Xu at

646-774-5023/ [yx2389@cumc.columbia.edu](mailto:yx2389@cumc.columbia.edu)

### Division of Movement Disorders

Columbia University  
Irving Medical Center

710 West 168th Street  
New York, NY 10032  
212-305-1303

[www.columbianeurology.org/patient-care/movement-disorders](http://www.columbianeurology.org/patient-care/movement-disorders)

### **Wish to Donate?...**

Should you be interested in discussing how you can help support our clinical, research, and patient care activities, please contact Matt Reals, Senior Director of Development, at 212-304-7203 or [mr3134@columbia.edu](mailto:mr3134@columbia.edu)

## The Doctor Is In

### *Q&A with Lori Quinn, EdD, PT*

*Associate Professor, Dept of Biobehavioral Sciences Teachers College, Columbia University*

**Q:** *When should I consider assistive devices (i.e. cane, walker, wheelchair), and how will I know which is right for me?*

**A:** **Choosing whether to use an assistance device is a personal decision, and a number of factors should be considered before making a purchase.**

**1. What is the goal?** Assistive devices such as canes or walkers are frequently used to making walking easier or when there is a concern for safety. People with Parkinson's disease can have problems with balance and also freezing (difficulty getting started with walking), and many devices can help with these problems. For example, rolling walkers allow for using the upper body to provide support during walking, and some come with a built-in laser pointer that can be helpful to initiate walking when freezing is a problem.

**2. Location, location, location.** Depending on your living situation, some assistive devices may or may not work for you. For example, if you live in a walk-up apartment, a walker may be difficult to carry up and down stairs. Be sure to consider your environment and how an assistive device might be best used.

**3. Try it out.** Many physical therapy facilities and medical device companies allow for rentals or loan out devices. It is important that you know the device works in your day to day functioning – around your house, getting to your car or public transportation – to be sure it is a good fit for you.

**4. Consult a professional.** Physical therapists are an important resource when considering an assistive device. They can help you choose the right device for you as well as be sure the type and fit are right for you.

If you have a question regarding Parkinson's and its treatment that you would like featured in the next newsletter, please e-mail your question to Elizabeth Delaney, LMSW at [movementdisorders@columbia.edu](mailto:movementdisorders@columbia.edu)

The information published in this newsletter is not intended to replace, and should not be interpreted or relied upon, as professional advice, whether medical or otherwise. Please refer to your own professional for all advice concerning legal, medical, or other matters published in connection with this article.



*"Don't count the days, make the days count."*

*-Muhammad Ali, diagnosed with PD in 1984*